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NO. 6092 P. 2

Atty. Dkt. No. 023340-0201

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OCT 24 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michael D. Green

Title: Exercise Suit

Appl. No.: 10/666,347

Filing Date: 9/19/2003

Examiner: T. Patel

Art Unit: 3765

Confirmation 4647  
Number:

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.  Julienne P. Britt (Printed Name)  [Signature] (Signature)  10/24/06 (Date of Deposit)
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TRANSMITTAL FOR RESTRICTION REQUIREMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Enclosed please find:

☒ Response to Restriction Requirement (2 pages).

☒ Credit Card Form.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for  
the total number of months checked below:

10/25/2006 MBINAS 00000053 10666347

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DLMR\_290461.1

OCT 24 2006 Atty. Dkt. No. 023340-0201

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$120.00	\$120.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$450.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:			\$120.00
<input type="checkbox"/>	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:			\$0.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract 1/2 of above):		\$60.00
Extension Fees Previously Paid:			\$0.00
TOTAL FEE:			\$60.00

A credit card payment form in the amount of \$60.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 24, 2006

By 

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